U.S. Peters and Trademert Office: U.S. DEPARTMENT OF COMMERCE

ct of 1995, no persons are required to respond to a collection of information unless & displays a valid CMB control number. PLICATION FEE DETERMINATION RECORD Application or Doctor Humber Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY OR (Column 1). (Column 2). SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATE IS FEE (1) RATE (1) FEE (1) ASIC FEE HVA NIA 150.00 NVA 300.00 17 CER 1 18/01 (0) a (c)] N/A EARCH FEE NA NIA \$250 NVA \$600 NIA 17 CFR 1 16(1), (4. or Invit XAMINATION FEE NA NIA NA \$100 \$200 NA If CFR 1 1How (p), or (q)) DTAL CLAMS . 🔫 X\$ 25 X\$50 DAFA (1864) minus 20 = OR VDEPENDENT CLAIMS X100 X200 minus 3 = 17 CFR 1 16(N) If the specification and drawings exceed 100 PPLICATION SIZE sheels of paper, the application size fee due EE . II CFR 1 16(4) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). 4160= LISTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(1)) +360= If the Gillerence in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II . OTHER THAN OR (Courter 3): (Column 1) (Column 2) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (1) ADDI-RATE (\$) - ADDI-AFTER PREVIOUSLY EXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (1) COT CER LINES Minus 0 X\$.25 X\$50. OR Independent . CAR CFR & 1804 Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) PRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160) **4180**= +360= OR TOTAL TOTAL ADD'L FEE ADO'L FEE . (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING number RATE (1) ADOI-RATE (\$) ADOI-AFTER. EXTRA PREVIOUSLY TIONAL TIONAL **AMENOMENT** PAID FOR FEE (A) FEE (\$) Total Corn Leads Minus X\$ 25 _ X\$50 OR Andependent GRF CFR 1.14p.ts Minus X100 X200. OR Application Size Fee (37 CFR 1,16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +360= +180= OR TOTAL. TOTAL OR ADD1 FEE ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "I the "Righest Number Previously Peld For" IN THIS SPACE to ties than 20, onler "20". " If the "Highest Number Pievlously Paid For IN THIS SPACE is less than 3, enter "." The Highest Humber Previously Pald For (Total or Independent) is the highest number found in the appropriate box in column 1. solection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the D to process) an application. Confidentially is poverned by 35 U.S.C. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete. ing galhering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments: emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pedent

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

ESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

Edement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450; DO NOT SEND FEES OR COMPLETED FORMS TO THIS